# **Historic, Archive Document**

Do not assume content reflects current scientific knowledge, policies, or practices.

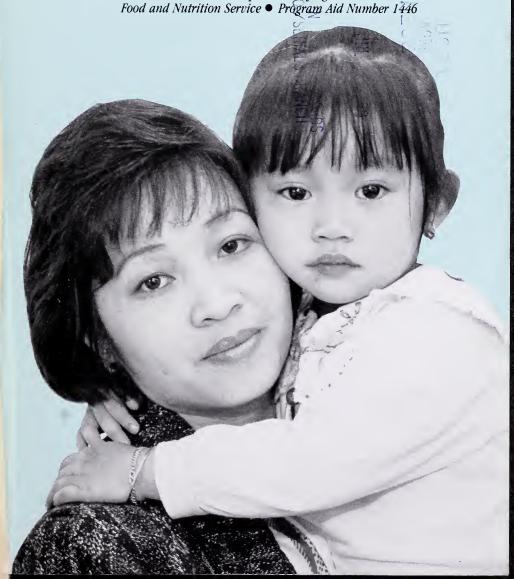


Ag84Pro C4

# WIC Makes a Difference

# Physicians and health care professionals can help through referrals.

United States Department of Agriculture Food and Nutrition Service ● Program Aid Number 1446



# WIC Makes a Difference

The Special Supplemental Food Program for Women, Infants, and Children (WIC) provides basic nutritious foods to over 4 million low-income women and children throughout the United States. WIC serves pregnant, postpartum, and breastfeeding women, and infants and children up to age 5 who are at nutritional risk.

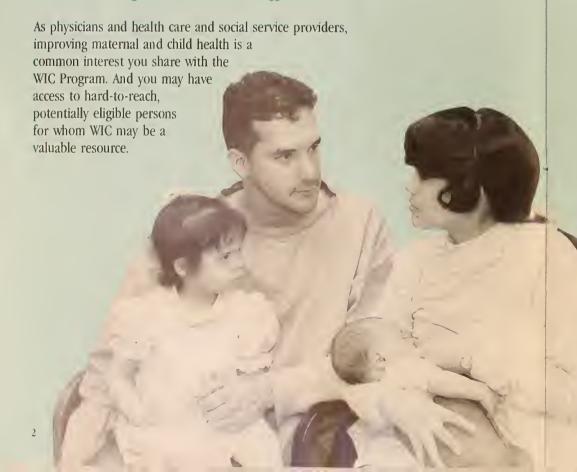
But that's not all. . .

WIC participants learn about good nutrition, and they are encouraged to seek and maintain appropriate medical care.

This combination of supplemental foods, nutrition education, and referrals to health care has proved effective in preventing and improving nutrition-related health problems of WIC participants.

# WIC Does Make a Difference!

# You Can Help WIC Make a Difference



WIC recognizes the importance of identifying and reaching those at highest risk among the eligible population. By targeting program benefits to persons most in need and most likely to benefit from participation in this program, we can make the best possible use of available resources. Low-income pregnant women and infants who have medically documented nutritional risk conditions are most vulnerable to the effects of poor nutrition and most likely to benefit from nutritional supplementation. WIC is especially interested in enrolling high-risk pregnant women early in their pregnancies so that the positive effects of participating in WIC can be maximized.

Your help is needed to reach these medically high-risk persons. By referring your potentially eligible clients and patients to their local WIC agency, you'll be assisting WIC in serving those most in need and providing a valuable benefit for your clients at the same time.

# Concerned Professionals Support WIC

WIC has been significantly expanded since it began in 1974, largely because of the support of concerned professionals who see a real need for this program in their communities. Physicians and health care and social service providers believe in WIC because they see the results, i.e., improvement in health indicators such as height and weight, and increased attention to nutrition and health.

The National WIC Evaluation, a major study funded by USDA, found that WIC participation resulted in improvements in a variety of factors associated with positive birth outcomes, including increased birthweights and duration of gestation. WIC participants were also shown to be more likely to register for prenatal care in their first trimester, and to obtain preventive health services, including immunizations, for their children.

A recent study conducted by the Centers for Disease Control of the U.S. Department of Health and Human Services concluded that a declining trend of anemia among low-income children is due to both a general improvement of iron intake and to public nutrition programs such as WIC.

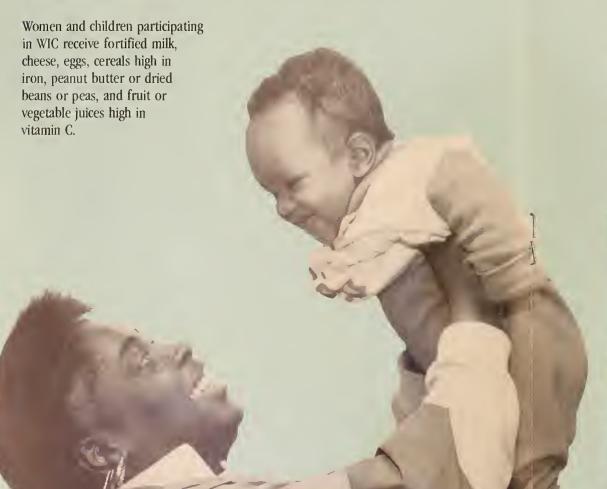
3

#### What Does WIC Provide?

#### Supplemental Foods

WIC provides supplemental foods rich in protein, iron, calcium, and vitamins A and C. These are key nutrients commonly lacking in the diets of the WIC target population.

The program strongly encourages breastfeeding and recognizes that breast milk is the ideal food for infants. However, bottle-fed infants receive ironfortified formula through WIC. Infants may also receive iron-fortified infant cereal and fruit juices high in vitamin C. In some cases, when medical conditions contraindicate the use of iron-fortified formula, WIC participants may be issued formula that is not iron-fortified, or be issued special formulas. Special formulas are also available to participants older than 12 months with certain medical conditions such as metabolic disorders, inborn errors of amino acid metabolism, gastrointestinal disorders, and malabsorption syndrome. The issuance of special formulas requires a prescription from a physician.



Participants receive foods through exchange of vouchers at retail grocery stores, through warehouses, or by home delivery, depending on the State or area in which they live.

#### Nutrition Education

Nutrition education is available to all adult WIC participants and, whenever possible, to child participants and other family members. The goals of nutrition education are to teach the relationship between proper nutrition and health, to help individuals develop better dietary habits, and to prevent nutrition-related problems by showing participants how best to use the WIC foods with other nutritious foods for a proper diet.

This information is provided by trained WIC personnel and covers a broad range of topics including:

- Nutritional needs during pregnancy.
- Dangers of the use of alcohol and other drugs during pregnancy.
- Feeding practices for infants and children.
- Specific ways to change dietary habits.

#### Referrals for Health Care

WIC does not provide routine health care but serves as an adjunct to the health care system. WIC enjoys a reciprocal relationship with the health care community, receiving referrals from private and public health care providers and providing referrals as needed for health and social services, including substance abuse counseling and treatment. Persons who are already receiving medical services are encouraged to remain under their physicians' care while they receive WIC benefits. Individuals who are not receiving medical care are encouraged to seek and maintain appropriate care through referrals to health services agencies, private physicians, and other community services.



#### Who Is Eligible?

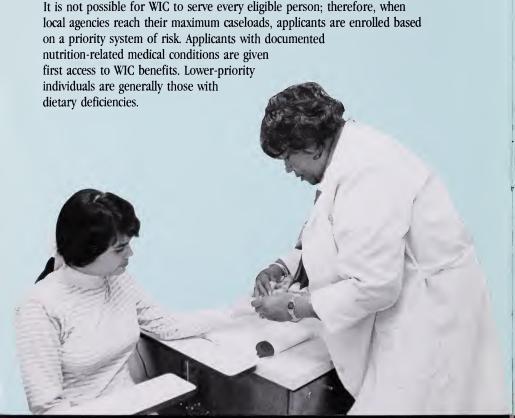
WIC is available to pregnant, breastfeeding, and postpartum women, and infants and children up to age 5 who are determined eligible based on these factors:

- They must reside within the State's service area.
- They must be at nutritional risk.
- The family's income must not exceed the State's standards.

Nutritional risk may be determined on the basis of medically related conditions such as anemia, underweight, maternal age, or dietary conditions such as inadequate food intake.

The assessment of nutritional risk is made at no cost to the applicant by a physician, nurse, nutritionist, or other health professional, usually at the local WIC clinic. WIC accepts medical data from private physicians or other health care providers as documentation of nutritional risk.

The maximum income standard for WIC participation is 185 percent of the U.S. Poverty Income Guidelines. Although States may set lower standards that correspond to income limitations used in State or local health care programs, most States use the maximum level.



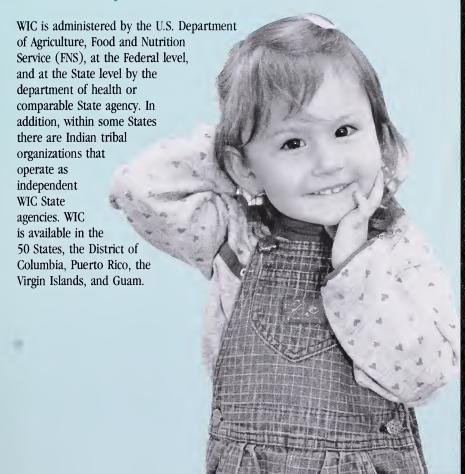
## Be a Part of the WIC Difference!

#### It's Easy to Help Through:

- Referrals of potentially eligible clients and patients to their local WIC
  agency. Your State health department can provide the location of the
  nearest WIC clinic and can give you specific information on income
  guidelines and nutritional risk requirements.
- Acceptance of referrals from WIC for health care and social services.

Physicians and other health care professionals can also help by agreeing to provide the medical data necessary to establish nutritional risk eligibility. Minimum data required by WIC include height, weight, and blood work to document iron nutriture.

## Need More Information?



You can find out more about WIC by contacting your State health department,
OR

the FNS Regional Office that serves your State:

Northeast Regional Office Food and Nutrition Service U.S. Department of Agriculture 10 Causeway Street Boston, MA 02222 (617) 565-6440

Connecticut, Maine, Massachusetts, New Hampshire, New York, Rhode Island, Vermont

Mid-Atlantic Regional Office Food and Nutrition Service U.S. Department of Agriculture Mercer Corporate Park Corporate Boulevard CN 02150 Trenton, NJ 08650 (609) 259-5100

Delaware, District of Columbia, Maryland, New Jersey, Pennsylvania, Puerto Rico, Virgin Islands, Virginia, West Virginia

Midwest Regional Office Food and Nutrition Service U.S. Department of Agriculture 50 East Washington Street Chicago, IL 60602 (312) 886-6625

Illinois, Indiana, Michigan, Minnesota, Ohio, Wisconsin

Mountain Plains Regional Office Food and Nutrition Service U.S. Department of Agriculture 1244 Speer Boulevard, Suite 903 Denver, CO 80204 (303) 844-0331

Colorado, Iowa, Kansas, Missouri, Montana, Nebraska, North Dakota, South Dakota, Utah, Wyoming Southeast Regional Office Food and Nutrition Service U.S. Department of Agriculture 1100 Spring Street, N.W. Atlanta, GA 30367 (404) 347-7092

Alabama, Florida, Georgia, Kentucky, Mississippi, North Carolina, South Carolina, Tennessee

Western Regional Office Food and Nutrition Service U.S. Department of Agriculture 550 Kearney Street, Room 400 San Francisco, CA 94108 (415) 556-3170

Alaska, Arizona, California, Hawaii, Idaho, Nevada, Oregon, Washington, Guam

Southwest Regional Office Food and Nutrition Service U.S. Department of Agriculture 1100 Commerce Street, Room 5C30 Dallas, TX 75242 (214) 767-0220

Arkansas, Louisiana, New Mexico, Oklahoma, Texas

OR

by contacting the Food and Nutrition Service, U.S. Department of Agriculture, 3101 Park Center Drive, Alexandria, VA 22302.

The Special Supplemental Food Program for Women, Infants, and Children is open to all eligible persons regardless of race, color, national origin, age, sex, or handicap.